Case 16-39778 Doc 1 Filed 12/19/16 Entered 12/19/16 15:45:46 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: Identify Yourself | | | |
|-----|--|---|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is o your government-issued picture identification (for example, your driver's license or passport). | First name | First name Middle name | |
| | Bring your picture identification to your meeting with the trustee | Garcia Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you hused in the last 8 year | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | f xxx-xx-3020 | | |

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Debtor 1 Enrique M. Garcia

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | |
|--|---|---|--|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | В | usiness name(s) | | | |
| | | EINs | E | EINs | | | |
| 5. | Where you live | 2247 N. LaPorte | If | Debtor 2 lives at a different address: | | | |
| | | Chicago, IL 60639 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | | |
| | | Cook | | | | | |
| | | County | County | | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | in | Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this nailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | | |
| 6. | Why you are choosing this district to file for | Check one: | С | heck one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | C | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | | |

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Debtor 1 Enrique M. Garcia

Case number (if known)

| Par | Tell the Court About | Your Ban | kruptcy C | ase | | | | | |
|---|---|---|-------------------------------|---|---|--|--|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | ■ Chapter 7 | | | | | | | |
| | | ☐ Cha | pter 11 | | | | | | |
| | | ☐ Cha | oter 12 | | | | | | |
| | | ☐ Cha | • | | | | | | |
| | | | | | | | | | |
| 8. | How you will pay the fee | al or | bout how yo | ou may pay. Typic attorney is submi | ally, if you are paying the fee yo | ck with the clerk's office in your local court ourself, you may pay with cash, cashier's alf, your attorney may pay with a credit ca | check, or money | | |
| | | | | | Ilments. If you choose this option (Official Form 103A). | on, sign and attach the Application for Inc | lividuals to Pay | | |
| | | | • | | ` , | n only if you are filing for Chapter 7. By la | ıw, a judge may, | | |
| | | bı ap | ut is not rec pplies to yo | quired to, waive your family size and | our fee, and may do so only if you you are unable to pay the fee in | our income is less than 150% of the offician installments). If you choose this option, cial Form 103B) and file it with your petition. | al poverty line that you must fill out | | |
| 9. Have you filed for bankruptcy within the last 8 years? | | | | | | | | | |
| | last o years: | ☐ res. | District | | When | Case number | | | |
| | | | | | When | C | | | |
| | | | District District | | When | Case number Case number | | | |
| | | | DISTRICT | | wilen | Case number | | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ No. | Go to | line 12. | | | | | |
| | | ☐ Yes. | Has yo | our landlord obtair | ned an eviction judgment agains | st you and do you want to stay in your res | idence? | | |
| | | | | No. Go to line 12 | 2. | | | | |
| | | | | Yes. Fill out <i>Initia</i> bankruptcy petiti | | Judgment Against You (Form 101A) and | file it with this | | |
| | | | | | | | | | |

| Debtor 1 | Enrique M. Garcia | Document | Page 4 of 48 Case nu | umber (if known) |
|----------|-------------------|----------|----------------------|------------------|
| | | | | |

| Part | Report About Any Bu | sinesses | You Owr | n as a Sole Proprietor | | | | |
|------|--|-------------------------------------|--|--|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name | e and location of business | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | ber, Street, City, State & ZIP Code | | | | |
| | it to this petition. | | Chec | k the appropriate box to describe your business: | | | | |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | | - , , , , , , , , , , , , , , , , , , , | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i> | deadlines operation in 11 U.S | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). | | | | | |
| | For a definition of small | No. | rami | not filing under Chapter 11. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bar Code. | | | | | |
| | | ☐ Yes. | I am f | filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| Part | t 4: Report if You Own or | Have Any | Hazardo | ous Property or Any Property That Needs Immediate Attention | | | | |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | ■ No. | If immed | the hazard? diate attention is , why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | S the property? Number, Street, City, State & Zip Code | | | | |

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Debtor 1 Enrique M. Garcia

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 48 Case number (if known) Debtor 1 **Enrique M. Garcia Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Enrique M. Garcia Signature of Debtor 2 Enrique M. Garcia Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on December 19, 2016

MM / DD / YYYY

Debtor 1 Enrique M. Garcia Document Page 7 of 48 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Daniel I | F. D'Attomo | Date | December 19, 2016 |
|-----------------|------------------------|---------------|-------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Daniel F. D | D'Attomo | | |
| Printed name | | | |
| The D'Atto | mo Law Firm | | |
| Firm name | | | |
| 4257 North | n Milwaukee Avenue | | |
| Suite B | | | |
| Chicago, I | L 60641 | | |
| | City, State & ZIP Code | | |
| Contact phone | 773-932-2100 | Email address | tami@golegalsupport.com |
| 38461 | | | |
| Bar number & St | ate | | |

| | | Docume | ent Page 8 of 48 | |
|---|-------------------------|-------------------|------------------|------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Enrique M. Garcia | a | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | Summarize Your Assets | | |
|-----|--|-------------|---------------------------|
| | | | essets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 182,980.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 25,916.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 208,896.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 307,444.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 22,587.24 |
| | Your total liabilities | \$ | 330,031.24 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,340.43 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,354.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other so | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Enrique M. Garcia Document Page 9 of 48
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,492.88

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | im |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Cas | se 16-39778 | B Doc 1 | | 12/19/16 ument | Entered 12/19/16 | 6 15:45:46 | Des | sc Main | | |
|------------------------------|---|------------------------------------|--|-----------------|-------------------------------------|--|---|---|--|-------|--|
| Fill | in this informa | ation to identify | your case and t | | | 1 700. 107 (7) 4 () | | | | | |
| Deb | tor 1 | Enrique M. C | | lle Name | | Last Name | | | | | |
| | tor 2 use, if filing) | First Name | Mido | lle Name | | Last Name | | | | | |
| Unit | ed States Bank | cruptcy Court for | the: NORTHE | RN DISTE | RICT OF ILLIN | NOIS | | | | | |
| Cas | e number | | | | | - | | | Check if this amended fil | | |
| SC n eac nink nforr | chedule ch category, sep it fits best. Be a mation. If more s | as complete and a space is needed, | roperty escribe items. List accurate as possil | ole. If two | married people | on asset fits in more than one one one one one one one of the one one of any additional pages, | equally responsi | ble for sup | he category where | - | |
| เทรพ | er every questio | on. | | | | | | | | | |
| Part | 1: Describe Ea | ach Residence, B | uilding, Land, or C | ther Real | Estate You Ow | n or Have an Interest In | | | | | |
| . Do | you own or hav | ve any legal or eq | uitable interest in | any reside | ence, building, | land, or similar property? | | | | | |
| | No. Go to Part 2 | 2 | | | | | | | | | |
| - | Yes. Where is t | he property? | | | | | | | | | |
| 1.1 | 2247 N. Lan | orto Avonuo | | What | is the property | ? Check all that apply | | | | | |
| | 2247 N. Laporte Avenue Street address, if available, or other description | | | - ■ □ | Condominium or cooperative | | | Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property.</i> | | | |
| | Chicago | IL State | 60639-0000 ZIP Code | | Land | or mobile home | Current value entire property | ? | Current value of portion you own \$182,9 | 1? | |
| | City | State | ZIF Code | _ | | | Describe the nature of your ownership in (such as fee simple, tenancy by the entire a life estate), if known. First Mortgage | | our ownership inte | erest | |
| | Cook | | | | Debtor 1 only Debtor 2 only | | T II St WIOTTY | aye | | | |
| County | | | | □ □ Other | ☐ Debtor 1 and Debtor 2 only ☐ Chec | | | ck if this is community property instructions) | | | |
| | | value of the " | artion vov. suc- | or all of : | rour ontries f | rom Dort 1 including cover | ontring for | | | | |
| | | | | | | rom Part 1, including any e | | | \$182,980 | .00 | |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Case number (if known) Document Debtor 1 **Enrique M. Garcia** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Ford Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Explorer** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2015 Year: Debtor 2 only Current value of the Current value of the 13,000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: At least one of the debtors and another \$25,000.00 \$25,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$25,000.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household Furniture \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... T.V. and Cell Phone \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Nο

Case 16-39778

Doc 1

Filed 12/19/16

Entered 12/19/16 15:45:46

Desc Main

| | Case 16-39778 | Doc 1 | Filed 12/19/16 | Entered 12/19/16 15:45:46 | Desc Main |
|----------------|---|------------------------------------|----------------------------|---|---|
| Debtor 1 | Enrique M. Garcia | | Document | Page 12 of 48 Case number (if known) | |
| ☐ Yes. | Describe | | | | |
| □ No | es ples: Everyday clothes, furs Describe | , leather coats | , designer wear, shoes, | accessories | |
| | Necess | sary Clothin | g | | \$300.00 |
| | | | | | |
| ■ No | | tume jewelry, e | engagement rings, wedd | ding rings, heirloom jewelry, watches, gems, g | old, silver |
| Exam ■ No | arm animals ples: Dogs, cats, birds, hors Describe | es | | | |
| ■ No | ther personal and househousehousehousehousehousehousehouse | - | ı did not already list, ir | ncluding any health aids you did not list | |
| | the dollar value of all of yo art 3. Write that number h | | | ny entries for pages you have attached | \$900.00 |
| Part 4: De | escribe Your Financial Assets | | | | |
| Do you o | wn or have any legal or eq | uitable intere | st in any of the follow | ing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | ples: Money you have in you | | | sit box, and on hand when you file your petition | on |
| | sits of money ples: Checking, savings, or institutions. If you have | other financial e multiple acco | accounts; certificates o | f deposit; shares in credit unions, brokerage h itution, list each. | nouses, and other similar |
| | | | Institution n | ame: | |
| | 17.1. | Checking | U.S. Bank | <u> </u> | \$16.00 |
| Exam | s, mutual funds, or publicly ples: Bond funds, investment | | | ey market accounts | |
| ■ No □ Yes. | 1 | nstitution or is | suer name: | | |
| joint | ublicly traded stock and inventure | nterests in inc | corporated and uninco | orporated businesses, including an interes | t in an LLC, partnership, and |
| ■ No □ Yes. | . Give specific information a Nam | about them ne of entity: | | % of ownership: | |
| Nego | | ersonal checks | s, cashiers' checks, pror | egotiable instruments nissory notes, and money orders. by signing or delivering them. | |
| | Give specific information al | bout them | Calcada to A/D D | lan and the | |
| Official For | m 106A/B | | Schedule A/B: P | roperty | page 3 |

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Case number (if known) Document

Debtor 1 Enrique M. Garcia

Issuer name:

| 21. | Retirement or pensio Examples: Interests in No | | 403(b), thrift savings accounts, or other | pension or profit-sharing plans | 3 |
|-----|--|--|---|----------------------------------|---|
| | ☐ Yes. List each accou | int separately. Type of account: | Institution name: | | |
| 22. | Examples: Agreement | ed deposits you have made s | o that you may continue service or use to public utilities (electric, gas, water), tele | | or others |
| | ■ No □ Yes | | Institution name or individual: | | |
| 23. | _ ` | for a periodic payment of mor | ney to you, either for life or for a number | of years) | |
| | ■ No □ Yes | ssuer name and description. | | | |
| 24. | | ion IRA, in an account in a 6, 529A(b), and 529(b)(1). | qualified ABLE program, or under a q | ualified state tuition progran | n. |
| | | nstitution name and description | on. Separately file the records of any inte | erests.11 U.S.C. § 521(c): | |
| 25. | Trusts, equitable or f | uture interests in property (| other than anything listed in line 1), a | nd rights or powers exercisa | able for your benefit |
| | | nformation about them | | | |
| 26. | | | nd other intellectual property eds from royalties and licensing agreem | ents | |
| | Yes. Give specific in | nformation about them | | | |
| | Examples: Building pe | · | les perative association holdings, liquor lice | enses, professional licenses | |
| | • | nformation about them | | | Owner to the of the |
| IVI | oney or property owed | to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to | you | | | |
| | ■ No □ Yes. Give specific in | formation about them, includi | ng whether you already filed the returns | and the tax years | |
| 29. | No | | support, child support, maintenance, div | orce settlement, property settle | ement |
| | ☐ Yes. Give specific in | formation | | | |
| 30. | benefits; u | | nents, disability benefits, sick pay, vacat eone else | ion pay, workers' compensation | on, Social Security |
| | ■ No□ Yes. Give specific in | nformation | | | |
| 31. | | | h savings account (HSA); credit, homeo | wner's, or renter's insurance | |
| | ■ No □ Yes. Name the insur | ance company of each policy Company name: | and list its value. Benefic | iary: | Surrender or refund |
| O# | inial Form 106A/B | | Cabadula A/D. Dranartu | | value: |

| Debtor 1 | Enrique M. Garcia | Document | Page 14 of 48 | B Case number <i>(if known)</i> | |
|---------------------------|--|-------------------------------|--------------------------|------------------------------------|-----------------------|
| | | | | , | |
| If you somed | terest in property that is due you from are the beneficiary of a living trust, expone has died. Give specific information | | | e currently entitled to rec | eive property because |
| Exam _l ■ No | s against third parties, whether or no oles: Accidents, employment disputes, Describe each claim | | | d for payment | |
| ■ No | contingent and unliquidated claims Describe each claim | of every nature, including | g counterclaims of t | the debtor and rights to | o set off claims |
| ■ No | nancial assets you did not already li Give specific information | st | | | |
| | the dollar value of all of your entries art 4. Write that number here | | | | \$16.00 |
| Part 5: De | scribe Any Business-Related Property Y | ou Own or Have an Interest I | n. List any real estate | in Part 1. | |
| No. Go | own or have any legal or equitable intere o to Part 6. Go to line 38. | est in any business-related p | roperty? | | |
| | escribe Any Farm- and Commercial Fishir you own or have an interest in farmland, list | | n or Have an Interest Ir | n. | |
| ■ No. | u own or have any legal or equitable Go to Part 7. s. Go to line 47. | interest in any farm- or o | commercial fishing- | related property? | |
| Part 7: | Describe All Property You Own or Have | e an Interest in That You Dic | Not List Above | | |
| • | u have other property of any kind your bles: Season tickets, country club men | _ | | | |

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

☐ Yes. Give specific information.......

\$0.00

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Case number (if known) Document Debtor 1 Enrique M. Garcia

| Part | 8: List the Totals of Each Part of this Form | | _ | |
|------|--|-------------|------------------------------|--------------|
| 55. | Part 1: Total real estate, line 2 | | | \$182,980.00 |
| 56. | Part 2: Total vehicles, line 5 | \$25,000.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$900.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$16.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$25,916.00 | Copy personal property total | \$25,916.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$208,896.00 |

Official Form 106A/B Schedule A/B: Property page 6

| | | IAMAIIII. | | |
|---------------------|--------------------------|-------------------|-------------|-------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Enrique M. Garcia | a | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this amended filir |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemp | otions are | you claiming? | Check one only | , even if | your spouse i | s filing with | vou. |
|----|--------------------|------------|---------------|----------------|-----------|---------------|---------------|------|
|----|--------------------|------------|---------------|----------------|-----------|---------------|---------------|------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | |
|--|---|--|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | | | |
| 2247 N. Laporte Avenue Chicago, IL 60639 Cook County | \$182,980.00 | | \$15,000.00 | 735 ILCS 5/12-901 | |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2015 Ford Explorer 13,000 miles Line from Schedule A/B: 3.1 | \$25,000.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| Line nom schedule A/B. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Household Furniture | \$400.00 | | \$500.00 | 735 ILCS 5/12-1001(b) | |
| Line Holli Schedule AVD. 4.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| T.V. and Cell Phone Line from Schedule A/B: 7.1 | \$200.00 | | \$300.00 | 735 ILCS 5/12-1001(b) | |
| Line Irom Schedule AVD. 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Necessary Clothing Line from Schedule A/B: 11.1 | \$300.00 | | \$400.00 | 735 ILCS 5/12-1001(b) | |
| LINE HOTH SCHEUUIE PVD. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |

Case 16-39778 Filed 12/19/16 Entered 12/19/16 15:45:46 Page 17 of 48 Document Debtor 1 Enrique M. Garcia Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking: U.S. Bank 735 ILCS 5/12-1001(b) \$16.00 \$100.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Doc 1

Yes

Desc Main

| | | Document F | <u> 2age 1</u> | 8 of 48 | | |
|--------------------------------------|--------------------------|---|----------------|---|--|---------------------------------|
| Fill in this informat | tion to identify you | r case: | | | | |
| Debtor 1 | Enrique M. Gard | | N | | - | |
| Dobtor 2 | First Name | Middle Name L | ast Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name L | ast Name | | - | |
| United States Bankr | ruptcy Court for the: | NORTHERN DISTRICT OF ILLING | OIS | | _ | |
| Case number | | | | | | |
| (if known) | | | | | | ck if this is an nded filing |
| Official Form | 106D | | | | | |
| | | Who Hove Claims Se | 001150 | d by Dranart | | 40/45 |
| Schedule D | : Creditors | Who Have Claims Se | <u> </u> | a by Propert | . <u>y</u> | 12/15 |
| | | If two married people are filing together, out, number the entries, and attach it to t | | | | |
| 1. Do any creditors ha | ve claims secured by | vour property? | | | | |
| | • | nis form to the court with your other scl | hedules. ` | You have nothing else | to report on this form. | |
| Yes. Fill in al | I of the information I | below. | | - | | |
| Part 1: List All S | Secured Claims | | | | | |
| | ims. If a creditor has r | more than one secured claim, list the credito | or separate | Column A | Column B | Column C |
| for each claim. If more | than one creditor has | a particular claim, list the other creditors in cal order according to the creditor's name. | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Ford Motor | Credit | Describe the property that secures the | claim: | \$27,301.00 | \$0.00 | |
| Creditor's Name | | Automobile | | | | |
| Do Boy 6246 | 20 | | | | | |
| Po Box 6218 Colorado Sp | | As of the date you file, the claim is: Che | ck all that | | | |
| 80962 | orings, co | apply. Contingent | | | | |
| Number, Street, Cit | ty, State & Zip Code | ☐ Unliquidated | | | | |
| | , | ☐ Disputed | | | | |
| Who owes the debt | ? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mor | rtgage or se | ecured | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and Debto | or 2 only | ☐ Statutory lien (such as tax lien, mecha | nic's lien) | | | |
| ☐ At least one of the | debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim community debt | n relates to a | Other (including a right to offset) | | | | |
| | Opened | | | | | |
| | 03/15 Last | | | | | |
| But tild at the con- | Active | Lord B. St. Market and Co. | 0953 | | | |
| Date debt was incurre | ed 7/01/16 | Last 4 digits of account number | | | | |
| 2.2 Neighborho | od Lend Serv | Describe the property that secures the | claim: | \$280,143.00 | \$182,980.00 | \$97,163.00 |
| Creditor's Name | Ou Lella Gel V | Real Estate Mortgage | | Ψ200,143.00 | Ψ102,300.00 | ψ31,103.00 |
| | | iteal Estate Mortgage | | | | |
| 1 Corporate | Dr Sto 360 | As of the date you file, the claim is: Che | ck all that | | | |
| Lake Zurich | | apply. | | | | |
| | ty, State & Zip Code | ☐ Contingent☐ Unliquidated | | | | |
| rumber, offeet, of | ty, State & Zip Gode | ☐ Disputed | | | | |
| Who owes the debt | ? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mor | rtgage or se | ecured | | |
| Debtor 2 only | | car loan) | - | | | |
| Debtor 1 and Debto | or 2 only | ☐ Statutory lien (such as tax lien, mecha | nic's lien) | | | |
| ☐ At least one of the | debtors and another | ☐ Judgment lien from a lawsuit | | | | |

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| Debtor 1 Enrique M | I. Garcia | | Case | number (if know) | |
|--------------------------|--|---|-------|------------------------------|--|
| First Name | Middle Na | ime Last Name | | | |
| ☐ Check if this claim re | elates to a | Other (including a right to offset) | | | |
| Date debt was incurred | Opened 08/11 Last Active 10/21/14 | Last 4 digits of account number | 9131 | | |
| | of your form, add t | olumn A on this page. Write that number the dollar value totals from all pages. | nere: | \$307,444.00 \$307,444.00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | 0430 10 03770 1 | Document | Page 2 | n of 48 | To Bese Main |
|--|---|--|-----------------|---------------------------------------|---|
| Fill in this i | nformation to identify your | | | | |
| Debtor 1 | Enrique M. Garcia | 1 | | | |
| 20010 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | j) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLI | NOIS | | |
| Case numb | er | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official F | Form 106E/F | | | | |
| | | ho Have Unsecured (| Claims | | 12/15 |
| | | | | Part 2 for graditors with NOND | RIORITY claims. List the other party to |
| Schedule D: (left. Attach th name and cas | Creditors Who Have Claims Sec e Continuation Page to this pag se number (if known). | e. If you have no information to repo | eeded, copy 1 | the Part you need, fill it out, nu | umber the entries in the boxes on the of any additional pages, write your |
| | ist All of Your PRIORITY Un | | | | |
| | reditors have priority unsecure | d claims against you? | | | |
| | so to Part 2. | | | | |
| ☐ Yes. | | | | | |
| | ist All of Your NONPRIORIT | | | | |
| _ ` | reditors have nonpriority unsec | | | | |
| ∐ No. Y | ou have nothing to report in this p | art. Submit this form to the court with y | our other sche | edules. | |
| Yes. | | | | | |
| unsecure | ed claim, list the creditor separately | aims in the alphabetical order of the of for each claim. For each claim listed, st the other creditors in Part 3.lf you ha | identify what t | ype of claim it is. Do not list clain | ms already included in Part 1. If more |
| | | | | | Total claim |
| 4.1 At | letic & Therapeutic Inst. | Last 4 digits of acco | unt number | 7111 | \$100.00 |
| | priority Creditor's Name | | | 0/00/00/1 | |
| | I7 Paysphere Circle icago, IL 60647-4947 | When was the debt i | ncurred? | 9/23/2014 | |
| | nber Street City State Zlp Code | As of the date you fil | e, the claim i | s: Check all that apply | |
| Who | incurred the debt? Check one. | | | | |
| = [| Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and and | _ ' | TY unsecured | d claim: | |
| | Check if this claim is for a comr | nunity | | | |
| deb | | | | ration agreement or divorce that | you did not |
| | e claim subject to offset? | report as priority claim | | | |
| = 1 | | | | g plans, and other similar debts | |
| | ⁄es | Other. Specify | ledical Bil | l | |

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Debtor 1 Enrique M. Garcia Case number (if know) 4.2 \$134.00 Citibank / Sears Last 4 digits of account number 0355 Nonpriority Creditor's Name Citicorp Credit Services/Attn: Opened 12/12 Last Active Centraliz When was the debt incurred? 7/09/16 Po Box 790040 Saint Louis, MO 63179 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 Citibank / Sears Last 4 digits of account number 2285 \$51.00 Nonpriority Creditor's Name Opened 07/04 Last Active Citicorp Cr Srvs/Centralized **Bankruptcy** When was the debt incurred? 7/19/16 Po Box 790040 S Louis, MO 63129 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify 4.4 City of Chicago EMS Last 4 digits of account number 0609 \$379.68 Nonpriority Creditor's Name When was the debt incurred? 6/23/2016 33589 Treasury Center Chicago, IL 60639 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts No **Medical Bill** ☐ Yes Other. Specify

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Case number (if know)

Debtor 1 Enrique M. Garcia 4.5 \$782.00 **Discover Financial** Last 4 digits of account number 4227 Nonpriority Creditor's Name Opened 11/14 Last Active Po Box 3025 When was the debt incurred? 7/25/16 New Albany, OH 43054 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.6 **Elan Financial Service** Last 4 digits of account number 5233 \$3,367.00 Nonpriority Creditor's Name Opened 10/07 Last Active Po Box 108 When was the debt incurred? 7/21/16 Saint Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.7 **Fnb Of Omaha** Last 4 digits of account number 9898 \$14,788.00 Nonpriority Creditor's Name Opened 09/14 Last Active Po Box 3412 When was the debt incurred? 8/12/16 Omaha, NE 68103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Unsecured

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| Oral Sugery Associates | Last 4 digits of account number | 9865 | \$202.87 |
|---|---|--|----------|
| Nonpriority Creditor's Name 2440 W. Peterson Ave. | When was the debt incurred? | 7/12/2016 | , |
| Chicago, IL 60659 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify | | |
| Swedish Covenant Hospital | Last 4 digits of account number | 9010 | \$990.05 |
| Nonpriority Creditor's Name 5145 North California Avenue Chicago, IL 60625-3642 | When was the debt incurred? | 6/24/2016 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Medical Bill | <u> </u> | |
| Us Bank | Last 4 digits of account number | 5891 | \$861.00 |
| Nonpriority Creditor's Name | _ | | <u>-</u> |
| 4325 17th Ave S Fargo, ND 58125 | When was the debt incurred? | Opened 12/15 Last Active 7/01/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | Dobte to pension or profit sharin | g plans, and other similar debts | |
| ■ No | Debts to pension of profit-shaffin | g pians, and other similar debts | |

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| Debioi | Enrique | M. Garcia | | Case | iumber (if know) | | |
|------------------------------|--|--|---|-------------------------|---------------------|---|--|
| 4.1 1 | Us Bank | | Last 4 digits of account number | 0157 | , | | \$829.00 |
| | Nonpriority Cro 4325 17th Fargo, ND | Ave S | When was the debt incurred? | Oper 6/30/ | ned 09/14 La /16 | ast Active | |
| | • | t City State Zlp Code | As of the date you file, the claim | is: Check | k all that apply | | |
| | Who incurred | I the debt? Check one. | | | | | |
| | Debtor 1 o | nly | ☐ Contingent | | | | |
| | Debtor 2 o | nly | ☐ Unliquidated | | | | |
| | Debtor 1 a | nd Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least on | e of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if the | his claim is for a community | ☐ Student loans☐ Obligations arising out of a sepa | ration and | recomment or divers | | |
| | | ubject to offset? | report as priority claims | aration ag | greement or divoi | rce that you did not | |
| | ■ No | • | Debts to pension or profit-sharing | ng plans, | and other similar | debts | |
| | ☐ Yes | | Other. Specify Credit Card | t | | | |
| 4.1 | Yongsuk L | _ertratanakul MD | Last 4 digits of account number | 3183 | | | \$102.64 |
| | | ke Shore #8 D | When was the debt incurred? | 6/13/ | 2016 | | |
| | | L 60657 t City State Zlp Code I the debt? Check one. | As of the date you file, the claim | is: Check | k all that apply | | |
| | Debtor 1 o | nlv | ☐ Contingent | | | | |
| | Debtor 2 o | • | ☐ Unliquidated | | | | |
| | _ | nd Debtor 2 only | ☐ Disputed | | | | |
| | | e of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | | his claim is for a community | ☐ Student loans | | | | |
| | debt | ubject to offset? | Obligations arising out of a separeport as priority claims | aration ag | greement or divo | rce that you did not | |
| | ■ No | • | Debts to pension or profit-sharing | ng plans, | and other similar | r debts | |
| | ☐ Yes | | Other. Specify Medical Bil | I | | | |
| Part 3: | List Othe | rs to Be Notified About a Deb | t That You Already Listed | | | | |
| is tryi have i notifie | ng to collect fr more than one ed for any debt | om you for a debt you owe to son creditor for any of the debts that is in Parts 1 or 2, do not fill out or Amounts for Each Type of Uns | secured Claim | n Parts 1 itional cr | or 2, then list the | ne collection agency here you do not have addition | e. Similarly, if you all persons to be |
| | the amounts of of unsecured c | | ns. This information is for statistical r | eporting | | · | amounts for each |
| | 6a | . Domestic support obligations | | 6a. | \$ | tal Claim | |
| - | Total | . Zomoono ouppon oonguneno | | ٠ | Ψ | 0.00 | |
| cla from P | aims Part 1 6b | . Taxes and certain other debts | you owe the government | 6b. | \$ | 0.00 | |
| | 6c | | jury while you were intoxicated | 6c. | \$ | 0.00 | |
| | 6d | . Other. Add all other priority unse | cured claims. Write that amount here. | 6d. | \$ | 0.00 | |
| | 6e | . Total Priority. Add lines 6a throu | ugh 6d. | 6e. | \$ | 0.00 | |
| | | | | | 7- | tal Claim | |
| | 6f. | Student loans | | 6f. | \$ | tal Claim 0.00 | |
| | Total | | | | | | |
| from P | aims Part 2 6g | . Obligations arising out of a se | paration agreement or divorce that | _ | _ | 0.00 | |
| | , and the second | you did not report as priority of | laims | 6g. | \$ | 0.00 | |
| | 6h | . Depts to pension or profit-sha | ring plans, and other similar debts | 6h. | \$ | | |

Official Form 106 E/F

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> 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 22,587.24 Total Nonpriority. Add lines 6f through 6i. 6j. 22,587.24

Official Form 106 E/F

| | | 170771110 | 30 - 1000 | |
|---------------------|--------------------------|-------------------|-------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Enrique M. Garci | a | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit Name, Numb | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|---------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| | | | | | |

| | | Docume | ent Page 27 o | ot 48 | |
|---------------------------|--------------------------------|---|------------------------|--|---|
| Fill in this | information to identify you | r case: | | | |
| Debtor 1 | Enrique M. Coro | ia | | | |
| Debioi i | Enrique M. Garc First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fili | ng) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Office Ota | ites bankruptey court for the. | TORTHER BOTRIOT | OI ILLINOIS | | |
| Case num | ber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Ott: -:- | I Cowe 4001 | | | | |
| | I Form 106H | | | | |
| Sched | lule H: Your Cod | debtors | | | 12/15 |
| | | | | | |
| Arizon | | a, Nevada, New Mexico, Pu | erto Rico, Texas, Wash | | ty states and territories include |
| in line Form out Co | e 2 again as a codebtor only | if that person is a guaran al Form 106E/F), or Sched | tor or cosigner. Make | sure you have listed to 06G). Use Schedule D, | g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt |
| | , | | | Oriect all Scriedule | ου τιαταρριγ. |
| 3.1 | | | | ☐ Schedule D, lin | ne |
| | Name | | | □ Schedule E/F, | |
| | | | | ☐ Schedule G, lin | ne |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |
| | - , | | | | |
| | | | | | |
| 3.2 | | | | Schedule D, lin | |
| | Name | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lin | ne |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase: | | | | | | | | | |
|--------------------|--|-------------------------------|--|-------------------|----------------|----------------------|-------------------|--|----------|-----------------------------|------|
| Del | otor 1 Enrique M. C | Garcia | | | _ | | | | | | |
| | otor 2 puse, if filing) | | | | _ | | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | T OF ILLINOIS | | _ | | | | | | |
| O Se | fficial Form 1061 chedule I: Your Inc | | | | | ☐ An☐ A s | income | ed filing ent showing as of the fo | ollowing | 12 | 2/15 |
| sup spo atta | as complete and accurate as pose plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment | are married and not filing wi | ng jointly, and your sp ith you, do not include | ouse is inforn | s liv natio | ing with yon about y | ou, incluyour spo | ude inforn ouse. If mo | nation a | about your ace is needed | d, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 | or non-fil | ling sp | ouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed □ Not employed | | | | ☐ Emplo | - | | | |
| | employers. | Occupation | Set Up Man | | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Tempel Steel | | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 5500 North Wolco Chicago, IL 60639 | | | | | | | | |
| | | How long employed to | here? 30 | | | | _ | | | | |
| Pai | t 2: Give Details About Mor | nthly Income | | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to rep | ort for a | any I | ine, write | \$0 in the | space. Inc | lude yo | our non-filing | |
| | ou or your non-filing spouse have mo | | ombine the information f | for all e | mplo | oyers for th | nat perso | n on the lir | nes bel | ow. If you nee | эd |
| | | | | | | For Debt | tor 1 | For Del | | | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3,7 | 783.95 | \$ | | N/A | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | | N/A | |

Calculate gross Income. Add line 2 + line 3.

3,783.95

N/A

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| Deb | tor 1 | Enrique M. Garcia | - | С | ase r | number (if known) | | | | |
|-----|----------------------------|---|----------|------------|------------|-------------------|---------------|----------------------|---------------------|--------------------|
| | | | | | For I | Debtor 1 | | Debtor a-filing s | | |
| | Cop | by line 4 here | 4. | _ | \$ | 3,783.95 | \$ | | N/A | <u>\</u> |
| 5. | List | all payroll deductions: | | | | | | | | |
| - | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ | 712.70 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ | 0.00 | \$- | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c | | \$ | 226.16 | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d | l. | \$ | 289.42 | \$_ | | N/A | _ |
| | 5e. | Insurance | 5e | ٠. | \$ | 215.24 | \$ | | N/A | <u>\</u> |
| | 5f. | Domestic support obligations | 5f. | | \$ | 0.00 | \$_ | | N/A | _ |
| | 5g. | Union dues | 5g | | \$ | 0.00 | \$_ | | N/A | |
| | 5h. | Other deductions. Specify: | _ 5h | .+ | \$ | | + \$ | | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | ; | \$ | 1,443.52 | \$_ | | N/A | <u>\</u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | ; | \$ | 2,340.43 | \$_ | | N/A | <u>\</u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | ı . | \$ | 0.00 | \$ | | N/A | . |
| | 8b. | Interest and dividends | 8b | ٠. | \$ | 0.00 | \$_ | | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | ·. | \$ | 0.00 | \$ | | N/A | ١ |
| | 8d. | Unemployment compensation | 8d | l. | \$ | 0.00 | \$ | | N/A | <u>\</u> |
| | 8e. | Social Security | 8e | ٠. | \$ | 0.00 | \$ | | N/A | <u>\</u> |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$ | 0.00 | \$ | | N/A | |
| | 8g. 8h. | Pension or retirement income | 8g 8h | | \$ | 0.00 | , <u>\$</u> _ | | N/A N/A | _ |
| | OII. | Other monthly income. Specify: | _ 011 | ·.+ — | Ψ <u> </u> | 0.00 | + » | | IN/A | <u>\</u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 0.00 | \$_ | | N/ | Ά. |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | 2 | 2,340.43 + \$ | | N/A | = \$ | 2,340.43 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | *- | | | | 1471 | | 2,040.40 |
| 11. | Star Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depe | | | • | | | e <i>J</i> . +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | | | . 12. | \$ | 2,340.43 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | Combi | ined ily income |
| | | No. | | | | | | | | |
| | | Voc Evoloin: | | | | | | | | |

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| Fill | in this information to identify your case: | | l | | |
|------------|--|-------------------------------|-----------------|------------------------------------|-------------------------------|
| | | | Object | , if this is: | |
| Deb | Enrique M. Garcia | | | k if this is: An amended filing | |
| Deb | otor 2 | | | A supplement show | wing postpetition chapter |
| (Spo | ouse, if filing) | | 1 | 13 expenses as of | the following date: |
| Unit | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL | INOIS | 1 | MM / DD / YYYY | |
| Cas | se number | | | | |
| (If kı | (nown) | | | | |
| Of | fficial Form 106J | | | | |
| | chedule J: Your Expenses | | | | 12/1 |
| Be info | as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question. | | | | |
| Par 1. | rt 1: Describe Your Household Is this a joint case? | | | | |
| ••• | ■ No. Go to line 2. | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | □No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expens | ses for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have dependents? ☐ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | • | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | Son | | 16 | Yes |
| | | | | | □ No |
| | | | | | ☐ Yes ☐ No |
| | | | | | □ No |
| | | | | | □ No |
| | | | | | ☐ Yes |
| 3. | Do your expenses include ■ No | | | | |
| | expenses of people other than yourself and your dependents? | | | | |
| Dan | <u>· </u> | | | | |
| Est exp | t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a suplicable date. | | | | |
| the | lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule i</i> fficial Form 106I.) | ce if you know I: Your Income | | Your expo | enses |
| • | • | | | | |
| 4. | The rental or home ownership expenses for your residence payments and any rent for the ground or lot. | e. Include first mortgage | e 4. \$ | | 1,801.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 0.00 |
| F | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as | homo oquity loons | 4d. \$ 5. \$ | | 0.00 |
| 5. | Additional mortgage payments for your residence, SUCN as | HOTHE EQUITY TORMS | ე. ა | | U.UU |

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| Deb | tor 1 | Enrique | M. Garcia | Ca | se num | ber (if known) | |
|-----|---------|---------------|--|-----------------------------------|----------|----------------|-----------------------------|
| 6. | Utiliti | ies: | | | | | |
| ٥. | 6a. | | heat, natural gas | | 6a. | \$ | 160.00 |
| | 6b. | | ver, garbage collection | | 6b. | · · | 83.00 |
| | 6c. | | , cell phone, Internet, satellite, and cab | e services | 6c. | \$ | 250.00 |
| | 6d. | Other. Spe | | | 6d. | \$ | 0.00 |
| 7. | Food | | ekeeping supplies | | 7. | · | 400.00 |
| 8. | | | hildren's education costs | | 8. | \$ | 0.00 |
| 9. | Cloth | ning, laundi | ry, and dry cleaning | | 9. | \$ | 20.00 |
| | | • | roducts and services | | 10. | \$ | 0.00 |
| | | - | ntal expenses | | 11. | · | 0.00 |
| | | | Include gas, maintenance, bus or train | fare. | | * | |
| | | | ar payments. | | 12. | \$ | 80.00 |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, maga | zines, and books | 13. | \$ | 0.00 |
| 14. | Char | itable cont | ributions and religious donations | | 14. | \$ | 0.00 |
| 15. | Insur | rance. | | | | | |
| | | | surance deducted from your pay or incl | uded in lines 4 or 20. | | | |
| | | Life insura | | | 15a. | | 0.00 |
| | 15b. | Health insi | urance | | 15b. | \$ | 0.00 |
| | 15c. | Vehicle ins | surance | | 15c. | \$ | 60.00 |
| | 15d. | Other insu | rance. Specify: | | 15d. | \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or | ncluded in lines 4 or 20. | | | |
| | Spec | · | | | 16. | \$ | 0.00 |
| 17. | | | ease payments: | | 4-7 | • | |
| | | | ents for Vehicle 1 | | 17a. | · | 500.00 |
| | | | ents for Vehicle 2 | | 17b. | · | 0.00 |
| | | Other. Spe | - | | 17c. | · | 0.00 |
| | | Other. Spe | | | 17d. | \$ | 0.00 |
| 18. | | | of alimony, maintenance, and suppo | | 18. | \$ | 0.00 |
| 10 | | | our pay on line 5, <i>Schedule I, Your I</i> you make to support others who do | | 10. | \$ | 0.00 |
| 13. | Spec | | you make to support others who do | not live with you. | 19. | Ψ | 0.00 |
| 20 | | · | erty expenses not included in lines 4 | or 5 of this form or on Schedul | _ | our Income | |
| 20. | | | on other property | or 5 or this form or on ochedur | 20a. | | 0.00 |
| | | Real estate | | | 20b. | | 0.00 |
| | | | nomeowner's, or renter's insurance | | 20c. | · | 0.00 |
| | | | ce, repair, and upkeep expenses | | 20d. | · | 0.00 |
| | | | er's association or condominium dues | | 20e. | | 0.00 |
| 21 | | r: Specify: | cr 3 association or condominant ducs | | | Ψ +\$ | 0.00 |
| ۷۱. | Othe | i. Specify. | | | - 21. | Τ Ψ | 0.00 |
| 22. | Calcu | ulate your r | monthly expenses | | | | |
| | 22a. | Add lines 4 | through 21. | | | \$ | 3,354.00 |
| | 22b. | Copy line 22 | 2 (monthly expenses for Debtor 2), if an | y, from Official Form 106J-2 | | \$ | |
| | 22c. / | Add line 22a | a and 22b. The result is your monthly e | xpenses. | | \$ | 3,354.00 |
| | | | | • | | | 3,00 1100 |
| 23. | | • | nonthly net income. | | 0.0 | • | |
| | | | 12 (your combined monthly income) from | | 23a. | · | 2,340.43 |
| | 23b. | Copy your | monthly expenses from line 22c above | | 23b. | -\$ | 3,354.00 |
| | 00 - | Cb.4 4 | and the same and t | | | | |
| | 23c. | | our monthly expenses from your month | y income. | 23c. | \$ | -1,013.57 |
| | | THE TESUIT | is your monthly net income. | | _50. | | , |
| 24. | Do ve | ou expect a | n increase or decrease in your expe | nses within the vear after you fi | ile this | s form? | |
| | For ex | kample, do yo | u expect to finish paying for your car loan wit | | | | se or decrease because of a |
| | | | terms of your mortgage? | | | | |
| | ■ No | 0. | | | | | |
| | □Y€ | 25 | Explain here: | | | | |

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| Fill in this infor | mation to identify your | case: | | | |
|-------------------------------------|---|--------------------------|--------------------------|--------------------------|---|
| Debtor 1 | Enrique M. Garcia | a | | | |
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | m 106Dec | | | | |
| | - | n Individual | Debtor's So | chedules | 12/15 |
| obtaining mone years, or both. 1 | | n connection with a bank | | | ement, concealing property, or 00, or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | kruptcy Petition Preparer's Notice, a, and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules file | ed with this declaration | on and |
| X /s/ En | rique M. Garcia | | x | | |
| | ue M. Garcia | | Signature o | f Debtor 2 | |

Date

Date December 19, 2016

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| FII | in this info | rmation to identify you | r case: | | | |
|-------------------|----------------------------|-----------------------------------|--|---|--|---|
| | btor 1 | Enrique M. Garc | | | | |
| | | First Name | Middle Name | Last Name | | |
| | btor 2 buse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ited States E | Sankruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| | se number nown) | | | | _ | Check if this is an amended filing |
| St | atemen | and accurate as possi | ble. If two married people a | duals Filing for B are filing together, both are this form. On the top of any | equally responsible for su | |
| nun | | wn). Answer every que | | | | |
| Pa | rt 1: Give | Details About Your Ma | rital Status and Where You | Lived Before | | |
| 1. | What is yo | our current marital statu | ıs? | | | |
| | ■ Marrie | | | | | |
| 2. | During the | e last 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. I | ist all of the places you l | ived in the last 3 years. Do no | ot include where you live now | ı. | |
| | Debtor 1 | Prior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | gal equivalent in a commun vada, New Mexico, Puerto R | | |
| | ■ No □ Yes. | Make sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Pai | rt 2 Exp | ain the Sources of You | r Income | | | |
| 4. | Fill in the to | otal amount of income yo | u received from all jobs and a | ng a business during this yeall businesses, including parter together, list it only once ur | time activities. | endar years? |
| | ■ No □ Yes. F | Fill in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |

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| Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurre individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. List below each creditor. Do not include payments for domestic support obligations, such as child support and alimony. Als not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payment attorney for this bankruptcy case. | curity, unemployment, gambling and lottery |
|--|---|
| Debtor 1 Sources of income Describe below. Describe belo | |
| Sources of income Describe below. Cross income from each source (before deductions and exclusions) | |
| Sources of income Describe below. Cross income from each source (before deductions and exclusions) | |
| 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurre individual primarily for a personal, family, or household purpose." □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Als not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. ■ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payment attorney for this bankruptcy case. | Gross income (before deductions and exclusions) |
| No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurre individual primarily for a personal, family, or household purpose." □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Als not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. ■ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payment attorney for this bankruptcy case. | |
| Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for | total amount you d alimony. Also, do ereditor. Do not clude payments to an |
| 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corn of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, includin a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. | I partner; corporations gent, including one for d support and |
| Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe | this payment |
| 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that bene insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider | bt that benefited an |
| Insider's Name and Address Dates of payment Total amount paid Amount you Reason for this payment paid still owe Include creditor's name | |

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| Pai | t 4: Identify Legal Actions, Reposses | sions, and Foreclosures | | | | | |
|-----|--|------------------------------|---|----------------------------|-------------------------|--|--|
| 9. | Within 1 year before you filed for bankr List all such matters, including personal in modifications, and contract disputes. | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case title Case number | Nature of the case | Court or agency | Status of the | e case | | |
| 10. | Within 1 year before you filed for bankr Check all that apply and fill in the details b | | perty repossessed, foreclos | sed, garnished, attached | , seized, or levied? | | |
| | No. Go to line 11. | | | | | | |
| | ☐ Yes. Fill in the information below. Creditor Name and Address | Describe the Property | , | Date | Value of the | | |
| | | Explain what happene | ed | | property | | |
| 11. | Within 90 days before you filed for bank accounts or refuse to make a payment No Yes. Fill in the details. | | cluding a bank or financial | institution, set off any a | mounts from your | | |
| | Creditor Name and Address | Describe the action th | e creditor took | Date action was taken | Amount | | |
| 12. | Within 1 year before you filed for bankr court-appointed receiver, a custodian, o ■ No □ Yes | | erty in the possession of a | an assignee for the bene | fit of creditors, a | | |
| Pa | List Certain Gifts and Contributio | ns | | | | | |
| 13. | Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift. | ruptcy, did you give any gif | ts with a total value of mor | e than \$600 per person? | | | |
| | Gifts with a total value of more than \$6 per person | 00 Describe the gifts | 5 | Dates you gave the gifts | Value | | |
| | Person to Whom You Gave the Gift and Address: | d | | | | | |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. | | | | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | · | ou contributed | Dates you contributed | Value | | |
| Pai | t 6: List Certain Losses | • | | | | | |
| 15. | | uptcy or since you filed for | bankruptcy, did you lose a | nything because of theft | , fire, other disaster, | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Describe the property you lost and | Describe any insurance of | overage for the loss | Date of your | Value of property | | |
| | how the loss occurred | | urance has paid. List pendin of Schedule A/B: Property. | g loss | lost | | |

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Debtor 1 Enrique M. Garcia

| Part 7: | List Certain | Payments | or | Transfers |
|---------|--------------|-----------------|----|------------------|
|---------|--------------|-----------------|----|------------------|

| 16. | consu | lithin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? clude any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | | | | |
|-----|--|---|---|---|-------------|---|---|--|--|--|
| | _ | No Yes. Fill in the details. | | | | | | | | |
| | Perso Addr Emai | on Who Was Paid | Description and variansferred | value of any pro | operty | Date payment or transfer was made | Amount of payment | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. | | | | | | | | | |
| | Perso Addr | on Who Was Paid ess | Description and variansferred | value of any pro | perty | Date payment or transfer was made | Amount of payment | | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No | | | | | | | | | |
| | Perso Addr | | Description and property transfer | | paymen | e any property or its received or debts exchange | Date transfer was made | | | |
| 19. | Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of trust | | Description and | Description and value of the property transferred | | | Date Transfer was made | | | |
| Par | t 8: | List of Certain Financial Accounts, In | struments, Safe Deposi | t Boxes, and St | orage Units | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | | | |
| | | e of Financial Institution and less (Number, Street, City, State and ZIP | Last 4 digits of account number | Type of acco | 1 | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | | |
| 21. | cash, | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | |
| | _ | lo 'es. Fill in the details. | | | | | | | | |
| | Name | e of Financial Institution ess (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe th | ne contents | Do you still have it? | | | |
| | | | | | | | | | | |

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| 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? | | | | | | |
|---|---|--|--|-----------------------|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | |
| Par | 9: Identify Property You Hold or Control for | , | | | | |
| 23. | Do you hold or control any property that someofor someone. | one else owns? Include any proper | ty you borrowed from, are storing for, | or hold in trust | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Valu | | |
| Par | 10: Give Details About Environmental Information | ation | | | | |
| For | he purpose of Part 10, the following definitions | apply: | | | | |
| • | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul Site means any location, facility, or property as to own, operate, or utilize it, including disposal | ir, land, soil, surface water, ground bstances, wastes, or material. defined under any environmental l | lwater, or other medium, including sta | atutes or | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s | mental law defines as a hazardous | waste, hazardous substance, toxic s | ubstance, | | |
| Rep | ort all notices, releases, and proceedings that yo | ou know about, regardless of when | they occurred. | | | |
| 24. | Has any governmental unit notified you that you | u may be liable or potentially liable | under or in violation of an environme | ntal law? | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any envi | ronmental law? Include settlements a | nd orders. | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | |
| Part 11: Give Details About Your Business or Connections to Any Business | | | | | | |
| 27. | 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | |

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Case number (if known) Document Debtor 1 Enrique M. Garcia ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Enrique M. Garcia
Enrique M. Garcia
Signature of Debtor 2

Signature of Debtor 1

Date December 19, 2016

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this infor | mation to identify your | case: | | |
|---|--|---------------------|--|--|
| Debtor 1 | Enrique M. Garcia | 1 | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse if, filing) | riist name | ivildale Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is an amended filing |
| | | | _ | |
| | | | | |
| Official Fo | rm 108 | | | |
| | | n for Indiv | iduals Filing Under Char | otor 7 |
| Stateme | iii oi iiileiilio | n ioi inaiv | iduals Filing Under Chaر | oter / 12/15 |
| lf var. are an ind | lividual filina undar abar | ator 7 van must fi | Il aut this form if. | |
| | lividual filing under chap re claims secured by you | . • | ii out tiils ioriii ii. | |
| | sed personal property a | | not expired | |
| | | | you file your bankruptcy petition or by the dat | e set for the meeting of creditors, |
| | ever is earlier, unless th | | e time for cause. You must also send copies t | |
| if two married po | eople are filing together | in a joint case. bo | oth are equally responsible for supplying corre | ct information. Both debtors must |
| | nd date the form. | | | |
| Re as complete | and accurate as nossib | le If more snace i | s needed attach a senarate sheet to this form | On the top of any additional pages |
| Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). | | | | |
| | | | | |
| Part 1: List Y | our Creditors Who Have | Secured Claims | | |
| 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the | | | | |
| information below. | | | | |
| Identify the cr | editor and the property the | nat is collateral | What do you intend to do with the property secures a debt? | that Did you claim the property as exempt on Schedule C? |
| | | | Scoules a uest: | as exempt on somedule C? |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | _ |
| | | | ☐ Retain the property and enter into a | ☐ Yes |

Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes \square Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ Surrender the property. ☐ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Enrique M. Garcia Case number (if known) | |) | | |
|---|---|--|------------------------------------|--|
| name: Description of property | | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes | |
| | ng debt: | | <u> </u> | |
| | | | | |
| Part 2: | List Your Unexpired Personal Proper | | | |
| in the inf | ormation below. Do not list real estate | you listed in Schedule G: Executory Contracts and Unexpir leases. Unexpired leases are leases that are still in effect; the ty lease if the trustee does not assume it. 11 U.S.C. § 365(p) | ne lease period has not yet ended. | |
| Describe | e your unexpired personal property lea | ses | Will the lease be assumed? | |
| Lessor's | name: | | □ No | |
| Descripti Property: | on of leased | | | |
| 1 Topolty | • | | ☐ Yes | |
| Lessor's | | | □ No | |
| Property: | on of leased | | ☐ Yes | |
| Lessor's | name: | | □ No | |
| Descripti | on of leased | | _ | |
| Property | | | ☐ Yes | |
| Lessor's | | | □ No | |
| Property: | on of leased | | ☐ Yes | |
| Lessor's | name: | | □ No | |
| Descripti | on of leased | | □ NO | |
| Property: | | | ☐ Yes | |
| Lessor's | | | □ No | |
| Property: | on of leased | | ☐ Yes | |
| Lessor's | name: | | □ No | |
| Descripti | on of leased | | | |
| Property | | | ☐ Yes | |
| Part 3: | Sign Below | | | |
| Under pe property | nalty of perjury, I declare that I have in that is subject to an unexpired lease. | dicated my intention about any property of my estate that s | ecures a debt and any personal | |
| X /s/ | Enrique M. Garcia | X | | |
| Eni | rique M. Garcia nature of Debtor 1 | Signature of Debtor 2 | | |
| | | Davis | | |
| Date | e December 19. 2016 | Date | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-39778 Doc 1 Filed 12/19/16 Entered 12/19/16 15:45:46 Desc Main Document Page 45 of 48

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Enrique M. Garcia | | Case N | o | |
|-------------|--|---|---|--|--|
| | | Debtor(s) | Chapte | 7 | |
| | DISCLOSURE OF COMPEN | NSATION OF ATTO | RNEY FOR I | DEBTOR(S) | |
| C | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filingly erendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy | , or agreed to be pa | aid to me, for services rendered or to | |
| | For legal services, I have agreed to accept | | \$ | 400.00 | |
| | Prior to the filing of this statement I have received | | | 400.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. \$ | 335.00 of the filing fee has been paid. | | | | |
| 3. T | he source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. T | he source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. I | I have not agreed to share the above-disclosed compe | ensation with any other person | n unless they are me | embers and associates of my law firm. | |
| [| I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the nan | | | | |
| 5. I | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | |
| b. c. | Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou | ement of affairs and plan which rs and confirmation hearing, a reduce to market value; ex rs as needed; preparatio | th may be required; and any adjourned l cemption planning | nearings thereof; | |
| 7. B | By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. | | | | |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of any nkruptcy proceeding. | agreement or arrangement for | or payment to me for | or representation of the debtor(s) in | |
| De | ecember 19, 2016 | /s/ Daniel F. D'A | ttomo | | |
| Da | | Daniel F. D'Attor Signature of Attorn The D'Attomo La 4257 North Milw Suite B Chicago, IL 6064 773-932-2100 F tami@golegalsu | mo 38461 ney aw Firm aukee Avenue 41 ax: 847-737-413 | 5 | |

United States Bankruptcy Court Northern District of Illinois

| In re | Enrique M. Garcia | D.L. () | Case No. | |
|-------|--|---|-----------------------------|----------------|
| | VE | Debtor(s) RIFICATION OF CREDITOR MA | Chapter 7 | |
| | V I. | Number of C | | 14 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credito | rs is true and correct to t | the best of my |
| Date: | December 19, 2016 | /s/ Enrique M. Garcia Enrique M. Garcia Signature of Debtor | | |

Athletic & Therapeutic Inst. 4947 Paysphere Circle Chicago, IL 60647-4947

Citibank / Sears Citicorp Credit Services/Attn: Centraliz Po Box 790040 Saint Louis, MO 63179

Citibank / Sears Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

City of Chicago EMS 33589 Treasury Center Chicago, IL 60639

Discover Financial Po Box 3025 New Albany, OH 43054

Elan Financial Service Po Box 108 Saint Louis, MO 63166

Fnb Of Omaha Po Box 3412 Omaha, NE 68103

Ford Motor Credit Po Box 62180 Colorado Springs, CO 80962

Neighborhood Lend Serv 1 Corporate Dr Ste 360 Lake Zurich, IL 60047

Oral Sugery Associates 2440 W. Peterson Ave. Chicago, IL 60659

Swedish Covenant Hospital 5145 North California Avenue Chicago, IL 60625-3642

Us Bank 4325 17th Ave S Fargo, ND 58125

Us Bank 4325 17th Ave S Fargo, ND 58125

Yongsuk Lertratanakul MD 3440 N. Lake Shore #8 D Chicago, IL 60657